



Family Behavior Model with Amount Cases in Odgj Case Study in Parringan Jenangan Village, Ponorogo

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ABSTRACT

Family is a primary group consisting of two or more people who have a network of interpersonal interactions, blood relations, marital relations, and adoption. (kependudukan.co.id). Role of Families with ODGJ Based on the causes of mental disorders, patients who experience mental disorders need the role of various parties for the healing process, including psychiatrists who can provide psychopharmacology, clinical psychologists who can provide psychoeducation and psychotherapy, health cadres who can monitor the patient's condition and helping the patient's family to refer to a health facility. When they see people with mental disorders going berserk, what they do is most do is scream for help, 83% of people scream when disturbed by ODGJ. Apart from that, when there is an ODGJ going berserk, the most important thing the community does is ask for help from other people, 60% of people choose to ask others for help when they are disturbed by ODGJ. Of the 30 people who were asked what they did when ODGJ went berserk. What they usually do is call the health worker or seek help from others.

Keywords : Behavior Model, Family, ODGJ Angry Pati.

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INTRODUCTION

Mental disorders are clinical behavioral syndromes that are associated with distress and suffering and can cause disturbances in one or more functions of human life (Keliat, 2011). The functions of human life that are affected by mental disorders such as social life activities, work rhythms and relationships with family are disrupted the presence of general symptoms of anxiety, depression, and psychosis (Yosep, 2011)

People with mental disorders are also chronic diseases that require a long process of healing. Treatment in a hospital is only temporary, then people with mental disorders must return to their community and this community is therapeutic, which will be able to bring patients to the recovery

stage. This recovery and healing process requires family support. To determine the success of the recovery requires family support (Nasriati, 2017)

Based on national data in Indonesia, it has increased between 10-20%. The disorders in question are mild and moderate mental disorders, while schizophrenic disorders with violent behavior around 0.8% or 10,000 people there are 8 people with mental disorders or insanity (Syamsul Hadi, 2010) According to data obtained from the Medical Records of the Atma Husada Mahakam Regional Mental Hospital in in 2016 there were 249 patients, the average number of emergency room patients in 2016 was 2.57 people, with a percentage of 38% experiencing hallucinations, 5% experiencing low self-esteem, 15% experiencing social isolation, 1% experiencing delusions , 35% experienced violent behavior, and 6% experienced self-care deficits. And in January to May 2017 the average number of inpatients at the Atma Husada Mahakam Samarinda Regional Mental Hospital reached 168 people, the average number of emergency room patients from January to June 2017 was 2.27 people with a percentage of 36 % hallucinations, 4% experiencing low self-esteem, 13% experiencing social isolation, 1% experiencing delusions, 32% experiencing violent behavior, and 5% experiencing self-care deficit. According to the data above, it was found that violent behavior is the second most common mental disorder after hallucinations. Violent behavior is a form of behavior that aims to injure someone physically or psychologically, can be done verbally, directed at oneself, others and the environment. Disabilities that occur in clients with mental disorders are associated with disabilities due to severe mental disorders experienced. Based on the phenomena and background described above, this researcher will reveal differences in patient responses to. revealed differences in patient responses to violent behavior in the Intermediate Room of the Atma Husada Mahakam Regional Mental Hospital.

Based on the above data, physiological treatment by bringing in a psychiatrist did not help much in handling schizophrenia cases (ODGJ) in Parringan village. So that the families in Parringan Village who have patients with ODGJ feel that the treatment in their village is lacking in results

METHODS

The research method for this research is to use the correlation research design method. Research Design This study is a correlation study, because this study aims to find a model of the factors that influence rage behavior in families of patients with ODGJ. (Nursalam and Pariani S, 2001:2001:135).

The total population is Jagan Village with a population of around 2000 people. Parringan Village itself has around 400-600 people living around the area. (<https://jpnn.com>2018). There were around 50 people with mental disorders in 2018, now in 2020 there are around 71 to 75 cases of ODGJ in Parringan Village

RESULTS AND DISCUSSION

Description of the research place

Parringan village is a village in the east of the city of Ponorogo. Geographical conditions and climate, government, population and social work and people's welfare, agriculture, forestry, animal husbandry, fisheries and energy, tourism, transportation, etc. Parangan Village is a delicious sweet potato rice maker and this tape is sent overseas. Apart from that, in Parangan Village there is also the production of tape candy and also food such as dodol tape etc. In this program, we will get a number of new things, such as tourism, we will get rafting tourism and also home factories that produce tape and also dodol tape.

Table 1. Genre Data

Number	MAN	WOMEN
	20 people	10 People
	65%	35%

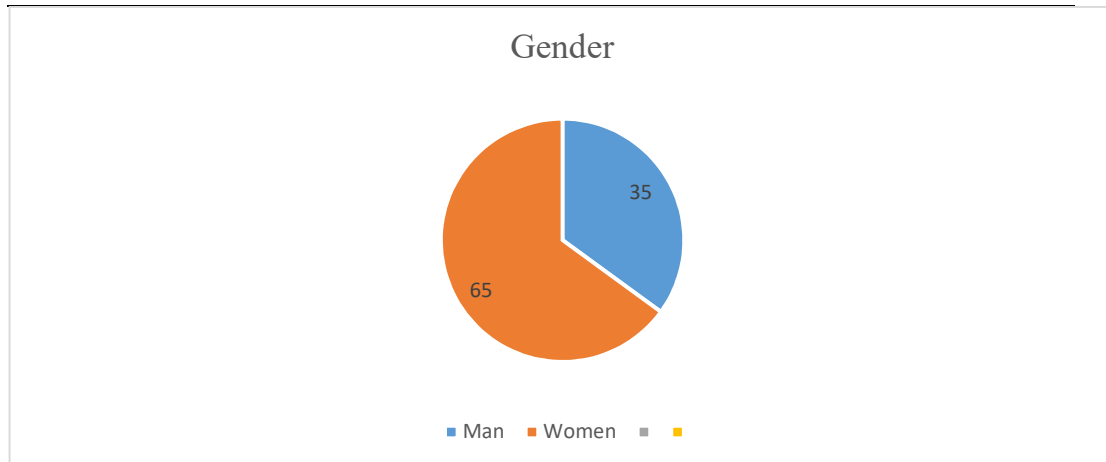
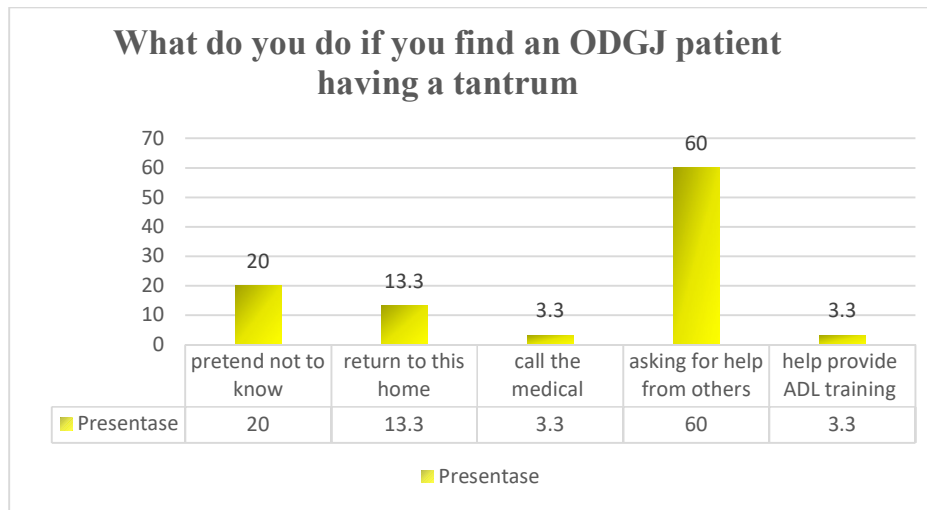


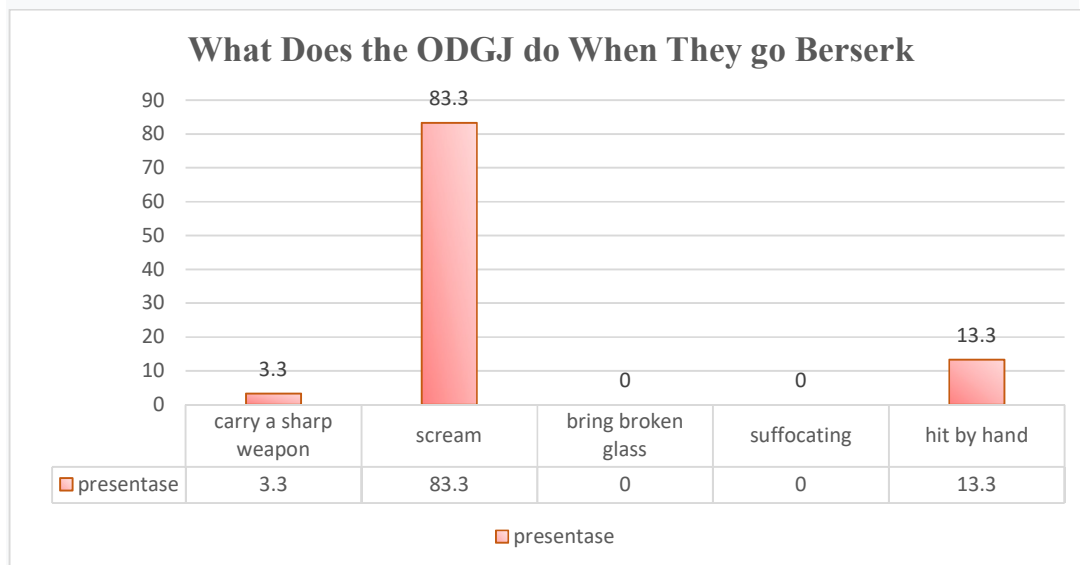
Figure 1. Based on research results for each question in the questionnaire

Table 2. What do you do if you find an ODGJ patient having a tantrum

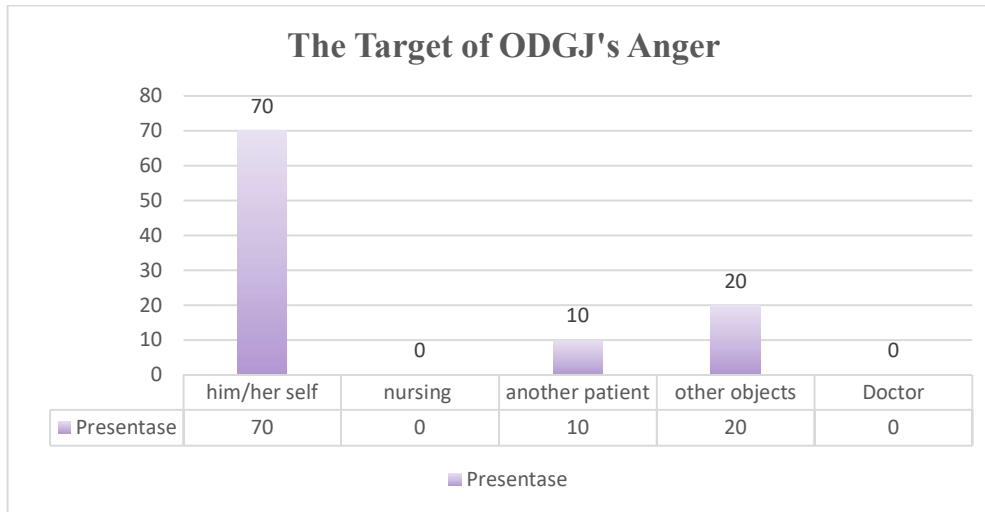


From the results of the questionnaire it turns out that when people find people with mental disorders who are raging, what they will do is ask for help from other people. asking for help there are around 60% of people will ask for help if bothered by ODGJ and the lowest is calling for medical help.

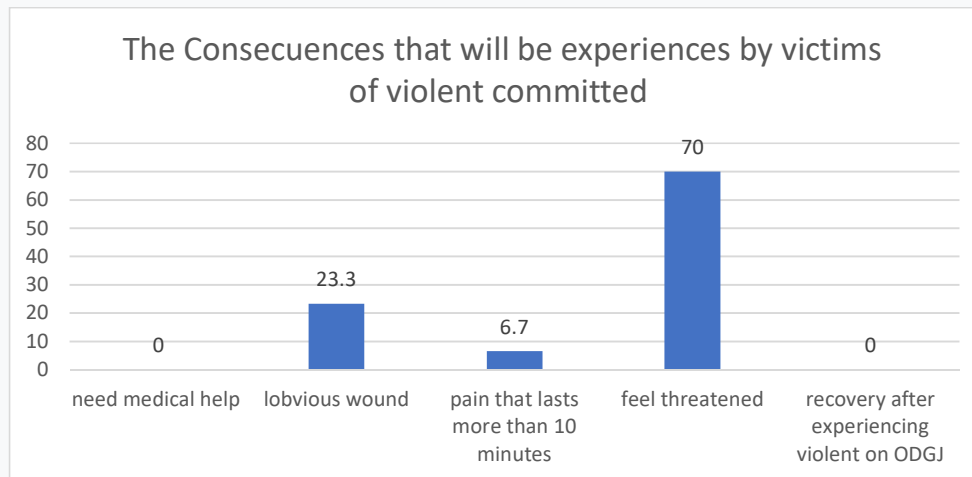
Table 3. What does the ODGJ do when they go berserk?



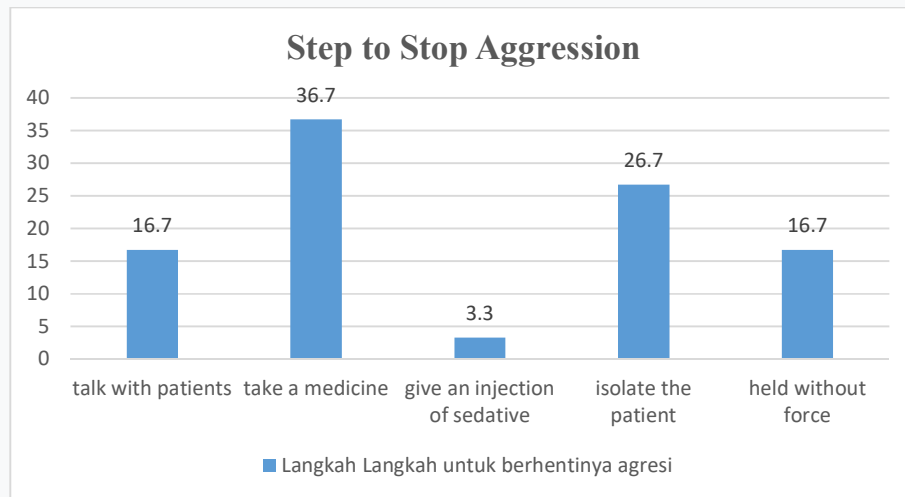
From the results of the questionnaire when the ODGJ went berserk, the answer that was often done was to scream for help or ask for help from people around him. By shouting for help the results of the questionnaire get results 83.3% higher than choking or carrying broken glass.

Table 4. The Target of ODGJ's Anger

The most frequent target of ODGJ's anger is himself. When he is angry he will usually beat himself or scream and often hit or injure himself. And the lowest is being angry with the nurse or the doctor.

Table 5. The consequences that will be experienced by victims of violence perpetrated by ODGJ patients

The consequences of the tantrums committed by the ODGJ victims are that usually the community feels threatened by the presence of this ODGJ or it could end up being the community shackling the ODGJ in a place because they feel that with the ODGJ they feel very uncomfortable with the ODGJ hanging around outside the house.

Table 6. Steps to stop aggression

With the 5th table about how to do it to stop aggression, what most people do when there is a ODGJ tantrum is to take medicine or the most with 36.7 and the lowest is 3.3 is to give injections of sedatives

CONCLUSION

Based on the results of the study, data were obtained from 30 people who were respondents, obtained data that from 30 respondents. When asked in a questionnaire about what to do. people screaming when disturbed by ODGJ. Apart from that, when there is an ODGJ going berserk, the most important thing the community does is ask for help from other people, 60% of people choose to ask others for help when they are disturbed by ODGJ. Of the 30 people who were asked what they did when ODGJ went berserk. What they usually do is call the health worker or seek help from others.

Suggestion

- It is hoped that the parties from the Pringan health center will assist in the evacuation process of ODGJ patients.
- It is hoped that the community is not afraid of ODGJ patients and should help those who experience ODGJ because they are still neighbors and members of their community
- Provide assistance to ODGJ by providing training

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